

TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission: 7

Application Number 09/964,390

Filing Date September 28, 2001

First Named Inventor Larry D. Woodring

Art Unit 2642

Examiner Name Q. H. Nguyen

Attorney Docket Number BS01379

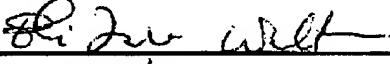
ENCLOSURES

(Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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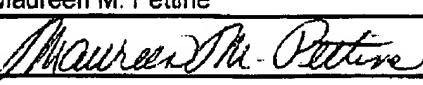
Remarks:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Name (Print/Type)	Bambi Faivre Walters	Reg. No.:	45,197
Signature			
Date	12/19/05		

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Name (Print/Type)	Maureen M. Pettine	Date	December 19, 2005
Signature			

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE DEC 19 2005

In re application of: Larry D. Woodring Group Art Unit: 2642
Application No.: 09/964,390 Examiner: Q. H. Nguyen
Filed: September 28, 2001
Title: "Systems and Methods for Providing User Profile Information in
Conjunction with an Enhanced Caller Information System"

VIA FACSIMILE 571-273-8300

Attn: Examiner Q. H. Nguyen

37 C.F.R. § 1.8 CERTIFICATE OF TRANSMISSION

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INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 CFR §§1.56, 1.97, and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached Form PTO 1449 (page 1). The submitted references include:

6,922,411	Taylor, Jonathan R.	07/2005
6,477,246	Dolan, et al.	11/2002
6,058,171	Hoopes, Thomas A.	05/2000

This Information Disclosure Statement is being submitted after the mailing of a first Office Action in this application and therefore, a certification fee is believed to be required (37 CFR § 1.97(b)(3)).

12/20/2005 MBINAS 00000016 09964390

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It is respectfully requested that the references listed on the attached forms be expressly considered by the Examiner and be made of record in the application and appear among the "References Cited" on any patent to issue therefrom.

Respectfully submitted,



Bambi F. Walters
Attorney for Applicants
Registration No. 45,197
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Williamsburg, VA 23188
Telephone: 757.253.5729

Date: 12/19/05

FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

Application Number	09/964,390
Filing Date	September 28, 2001
First Named Inventor	Larry D. Woodring
Examiner Name	G. H. Nguyen
Art Unit	2642
Attorney Docket No.	BS01379

TOTAL AMOUNT OF PAYMENT	\$180.00
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METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other
 Deposit Account Deposit Account No. 19-2167

Deposit Account Name:

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) Indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION
1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Smal. Enty Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee Paid (\$)</u>
— 20 or HP =	x	=

HP=highest number of independent claims paid for, if greater than 3.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	=	

HP=highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50	(round up) x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supplemental IDS Fee

180.00

SUBMITTED BY:		Complete (if applicable)		
Name (Print/Type)	Bambi F. Walters	Registration No. (Attorney/Agent)	45,197	Telephone: (757) 253-5729
Signature	<u>Bambi F. Walters</u>	Date	12/19/05	

Please type a plus sign (+) inside this box →

PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

Approved for use through 10/31/2022. GPO 2021-088.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO		Complete If Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>		Application Number	09/964,390
		Filing Date	September 28, 2001
		First Named Inventor	Larry D. Woodring
		Group Art Unit	2642
		Examiner Name	Q. H. Nguyen
Sheet	1	of	1
		Attorney Docket Number	
		BS01379	

Examiner Signature		Date Considered	
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EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments or the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.